P21 0000 58622

(Requestor's Name)	_
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
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Codified Copies Codificates of Clabus	
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Special Instructions to Filing Officer:	1
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A. Butler

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ARTUS DE MAL	HERBE PA	
DOCUMENT NUN	IBER: P21000058622		
	s of Amendment and fee are so	ubmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Aline DARMOUNI		
		Name of Contact Perso	n
	EXCO US ATRIUM		
	<u> </u>	Firm/ Company	-
	1200 BRICKELL AVE SUF		
		Address	
	MIAMI, FL 33131		
		City/ State and Zip Cod	c
	office@excous.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call: at (600 4405
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

ARTUS DE MALHERBE PA	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P21000058622	SECRETARY OF STATE
(Document Number	of Corporation (if known) TALLAHASSEE, FL
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	dress in Florida, enter the name of the
Name of New Registered Agent	
tFlorida si	treet address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Simplify of Van	Parintaged Army if structure
Signature of New I	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	p	DE MALHERBE, ARTUS	1108 ALBERCA ST
Add X Remove			CORAL GABLES, FL 33134
2) Change	P	BLAY DE MALHERBE, ARTUS	1108 ALBERCA ST
X Add			CORAL GABLES, FL 33134
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
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		<u> </u>
	nange, reclassification, or cancellation of issued shares,	
i an amendment provides for an exen		
provisions for implementing the amer	endment if not contained in the amendment itself:	
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
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provisions for implementing the amer	endment if not contained in the amendment itself:	

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requiepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for officient for approval.	the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The faceach voting group entitled to vote separately on the ame	ollowing statement indment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
l Signature (By a di	rector, president or other officer – if directors or officers	
	 I. by an incorporator – if in the hands of a receiver, trusteed fiduciary by that fiduciary) 	ee, or other court
	(Typed or printed name of person signing)	
	(Title of person signing)	